

CAMPGROUND HOST VOLUNTEER INTEREST SHEET

PLEASE RETURN TO:

J. Grant
Fishermen's Bend Recreation Site
P.O. Box 785
Mill City, OR 97360

OR VIA E-MAIL:

jgrant@or.blm.gov

PHONE: (503) 897-2406

FAX: (503) 897-3098

NAME(S):
ADDRESS:
PHONE: ()
BIRTH DATE(S):
NUMBER IN PARTY WHO WOULD RESIDE AT CAMPGROUND:
CURRENT OCCUPATION(S):
PRIOR OCCUPATION(S):
CAMPING EQUIPMENT TO BE USED (PLEASE INDICATE LENGTH): TRAILER: _____ 5 TH WHEEL: _____ R.V. _____ CAMPER: _____ OTHER: _____
DATES AVAILABLE:
PHYSICAL LIMITATIONS THAT MAY AFFECT YOUR VOLUNTEER WORK:
HOBBIES, INTERESTS, PAST EXPERIENCE IN OTHER CAMPGROUNDS, OR OTHER INFORMATION YOU FEEL IS PERTINENT:

Signature: _____ Date: _____

Signature: _____ Date: _____